

**STATE OF MAINE
DIRECT HIRE CAREER OPPORTUNITY
CORRECTIONAL PLANT MAINTENANCE ENGINEER I
MAINE STATE PRISON**

Date: January 09, 2012
Pay Grade: 21
Class Code: 5322

Expires: January 26, 2012
Bargaining Unit MSEA, Pro/Tech
Pay Range: \$32,656.00 - \$44,033.60

Value of State Paid Dental Insurance: \$13.69 bi-weekly
Value of State Paid Health Insurance,
based on the employee's wage and rate and status with regard to the health credit program as of July 1, 2011

Level 1	95% State Contribution (employee pays 5%)	\$345.58 biweekly
Level 2	90% State Contribution (employee pays 10%):	\$327.39 biweekly
Level 3	85% State Contribution (employee pays 15%):	\$309.20 biweekly

Value of State's share of Employee Retirement contributions: 17.87%

Description: The Maine State Prison in Warren has an opening for a Correctional Plant Maintenance Engineer I. This is a multi-faceted position involving monitoring the operation, maintenance and repair of a high pressure steam system as well as performing maintenance and repair of boilers, water, heating, sewerage, mechanical and electrical systems and locks throughout the facility. The position may be responsible for supervising a prisoner work crew. The position may be required to work in a rotating on-call schedule.

To be successful in this job you must have knowledge of:

- high and low pressure boilers, steam heating plants and furnace operations and their maintenance.
- hot water heating systems, including pumps and controllers.
- and experience working on large scale HVAC systems and their components.
- and experience working with DDC building automation systems.
- of OSHA precautions.

As well you must have the ability to:

- lay out, inspect and oversee the work of skilled tradesmen, boiler engineers and operators.
- perform skilled and complex maintenance jobs.
- read and understand plans and work from sketches and specifications.
- plan, assign and direct the work of journeymen, semi-skilled and unskilled workers and prisoners.
- use a variety of hand tools.
- keep records, make reports and requisition needed supplies and tools.
- comply with industry and American Correctional Association standards associated with the assigned duties and tasks.
- work "on-call."
- make electrical and mechanical repairs to heating, steam, water and locking systems.

Minimum Qualifications: Four (4) years' experience, training or education in the operation of steam generating plants, maintenance and repair of water, heating and electrical systems in a large commercial or public plant.

Licensing/Registration/Certification Requirements: Possession of an engineer's license of the class required by the State of Maine for the equipment to be operated.

HOW TO APPLY: Obtain applications at www.maine.gov/corrections/Career/ or at MSP
Submit by: 01/21/2012 to Office of Human Resources, Maine State Prison 807 Cushing Road, Warren, Maine 04864
Phone: 273-5344, FAX: 273-5345 mnp.personnel@maine.gov

Maine State Prison
Office of Human Resources
807 Cushing Road, Warren, Maine 04864

Dear Applicant,

Thank you for expressing an interest in working as a Correctional Plant Maintenance Engineer I at the Maine State Prison in Warren, Maine.

We want to make sure that you have an accurate understanding of the job before you proceed further with the application. It involves multi- faceted maintenance and repair work, including, but not limited to monitoring of employee and prisoner work crews in the maintenance and repair of boilers, furnaces, electrical and video systems, plumbing and heating systems as well as repair of locking systems and locks.

In this package you will find:

- State of Maine Direct Hire Application
- Supplemental questionnaire, required as part of the application and allows the Department to conduct a thorough background check
- Medical authorization
- Reference Forms, which you need to complete and sign thereof them so we can obtain valid references

It is important that all job information you provide is true and accurate without omissions that could impact your suitability for this job.

Please make sure that the contact information you give on this application is up to date.

Should you have any questions do not hesitate to contact us at:

E-mail: msp.personnel Phone: 207-273-5344

Office of Human Resources
Maine State Prison

BACKGROUND CHECK FOR EMPLOYMENT IN THE MAINE DEPARTMENT OF CORRECTIONS

Maine State Prison – Correctional Plant Maintenance Engineer I

IN ORDER TO PROCESS YOUR APPLICATION FOR A POSITION AT THIS *FACILITY*, THE MAINE DEPARTMENT OF CORRECTIONS CONDUCTS A BACKGROUND CHECK WHICH INCLUDES THE FOLLOWING:

- Department of Corrections records
- Motor Vehicle records
- Law enforcement records
- Maine State Bureau of Identification
- Federal Bureau of Identification

ANY CRIMINAL CONVICTION AND/OR JUVENILE ADJUDICATION MAY DISQUALIFY YOU FROM CONSIDERATION FOR A *Correctional Plant Maintenance Engineer I*.

This includes motor vehicle violations that constitute crimes including OUIs/DWIs/OAs committed as an Adult and/or as a Juvenile.

HAVE YOU EVER BEEN CONVICTED OF A CRIME AS AN ADULT OR ADJUDICATED OF ANY CRIME AS A JUVENILE?

This includes crimes or juvenile crimes or their equivalent in any jurisdiction including federal, military, tribal, and other states or countries.

If YES, please explain:

Signature of Applicant

Date

Failure to disclose any of the above may be cause for disqualification and/or termination of your employment.

STATEMENT OF APPLICANT

I understand the following information will be utilized solely for the purpose of obtaining a background check as described above.

Title of Position

Applicant's Signature

Date of Birth

Name Printed

Social Security Number

Driver's License Number/specify State

SUPPLEMENTAL QUESTIONS
Maine State Prison

Please take the time to thoroughly explain your responses to the following questions.

1. Why do you want to work *at the Maine State Prison*?
2. Do you have a career goal(s) in the corrections field?
3. Please tell us about any experience you have interacting with *juveniles/prisoners/or anyone else which* might enhance your performance as a *Correctional Plant Maintenance Engineer I*.
4. Would you have a problem dealing with any particular type of offender?
5. Is there any part of this job, as you understand it, which you might be unwilling to do?
6. Do you know anyone who is a current or former prisoner/juvenile resident/probationer/or otherwise been in the custody or under the supervision of the Maine Department of Corrections?
7. Have you ever been a supervisor? When? Where? Explain what you did.
8. How did you hear about this position?
9. When are you available to begin?
10. Do you have experience using firearms?
11. On the following page, please list all other names you have ever used.
12. On the following page, please list your residences for the past 10 years.
13. Can you perform the duties of this position, with or without accommodation?

Names

1. _____ from _____ to _____
2. _____ from _____ to _____
3. _____ from _____ to _____
4. _____ from _____ to _____

Residences for the last 10 years

1. _____ from _____ to _____
2. _____ from _____ to _____
3. _____ from _____ to _____
4. _____ from _____ to _____
5. _____ from _____ to _____



State of Maine
(An Equal Opportunity Employer)

Employment Application
(revised February 2011)

Return to:
Office of Human
Resources
Maine State Prison
807 Cushing Road
Warren, ME 04864

Last Name

First Name

M.I.

Social Security
Number

Have you ever worked, attained licensing or certification, attended school or been convicted of a criminal offense under a different name?

☐ Yes ☐ No If so, what is that name?

Name #1

Name #2

Name #3

Name #4

Mailing Address

Town

State

ZIP Code

Home Phone #

Work Phone #

Email Address

Title of the Job You're Applying For
Correctional Plant Maintenance Engineer I

Job Class Code
5322

Veteran's Preference: See pamphlet "Veteran's Preference in Maine State Service" or go to www.maine.gov/state_jobs/veteran.htm for more information. Provide DD214 and disability forms if applicable.

- ☐ Not Claimed
☐ 5 Points (Requires DD214)
☐ 10 Points (Requires DD214 and VA Statement of Disability)

Only U.S. citizens or aliens who have a legal right to work and remain permanently in the U.S. are eligible for employment. Can you, after employment, submit verification of your legal right to work in the United States?

☐ Yes ☐ No

Are you at least 18 years of age? ☐ Yes ☐ No

Are you a present or former Maine State employee? ☐ Yes ☐ No

Department _____	Job Title _____	Begin Date _____	End Date _____
Are you willing to work: <input type="checkbox"/> Saturdays <input type="checkbox"/> Sundays <input type="checkbox"/> Holidays			
Do you have a current Maine driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what type? <input type="checkbox"/> Class A <input type="checkbox"/> Class B <input type="checkbox"/> Class C			
Are you willing to travel on the job? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, are you willing to use your own vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you willing to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No What shifts are you willing to work? <input type="checkbox"/> 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd			
ADMINISTRATIVE SKILLS (subject to formal testing and work sampling) WORDS PER MINUTE			
Typewriter: _____		Keyboarding: _____	
FOREIGN LANGUAGE SKILLS			
Language _____	Speak <input type="checkbox"/>	Read <input type="checkbox"/>	Write <input type="checkbox"/>
Language _____	Speak <input type="checkbox"/>	Read <input type="checkbox"/>	Write <input type="checkbox"/>

Geographic Preference

Candidates are asked to specify the geographic areas of the State in which they will accept employment by completing the form below. You may select or change the conditions of your referral by checking the appropriate boxes. Mark the area(s) and condition(s) of employment suitable to you. If you do not select any areas, the bureau will automatically refer your name for all counties and employment types.

F = Full Time

P = Part Time

T = Temporary

S=Seasonal

		F	P	T	S			F	P	T	S			F	P	T	S
0	All Counties					21	Hancock					42	Piscataquis				
1	Androscoggin					22	Bar Harbor					43	Dover-Foxcroft				
2	Lewiston					23	Bucksport					44	Greenville				
3	Livermore					24	Ellsworth					45	Sagadahoc				
4	Aroostook					25	Kennebec					46	Bath				
5	Ashland					26	Augusta					48	Somerset				
6	Caribou					27	Augusta-RPC					49	Skowhegan				
7	Fort Kent					28	Waterville					50	Waldo				
8	Houlton					29	Knox					51	Belfast				
9	Madawaska					30	Rockland					52	Washington				
10	Presque Isle					31	Thomaston					53	Bucks Harbor				
11	Van Buren					32	Lincoln					54	Calais				
12	Cumberland					33	Boothbay					55	Eastport				
13	Portland					34	Oxford					56	Machias				
14	Brunswick					35	Norway					57	York				
16	South Portland					36	Rumford					58	Biddeford				
17	Windham					37	Penobscot					59	Kittery				
18	Franklin					38	Bangor					60	Saco				
19	Farmington					39	Bangor BMHI					61	Sanford				
20	Rangeley					40	Charleston										
						41	Millinocket										

Education

Last Yr Completed	Name and Location	Sem Hrs	Qtr Hrs	Major	Minor	Yr Of Deg	Degree Type
High School 1 2 3 4							
College or University 1 2 3 4							
Grad School 1 2 3 4							
Prof School 1 2 3 4							
Other 1 2 3 4							

Licenses, Certifications and Registrations (Please attach copies)

Name of License, Registration or Certification	License Number	State of Issue	Expiration Date

Important instructions for Completing Employment History

This portion must be accurate and complete. APPLICATIONS LACKING SUFFICIENT INFORMATION WILL BE REJECTED. List your entire work history including part-time, temporary and volunteer jobs. List jobs in reverse order, starting with your present or last job. List each promotion as a separate job. To evaluate your qualifications we must have accurate and complete information on previous job tasks and levels of responsibility. Part or all of your examination score may be based on your work history. Be thorough and specific in the detailing of duties. SPECIAL NOTE: If additional space is needed, attach separate sheets.

Employer #1	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$ _____
Your Title:	Hours/Week: _____
Number & Titles of Employees You Supervised:	Supervisor's Name & Title: _____
Duties: 	
Reason for Leaving: _____	
Employer #2	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$ _____
Your Title:	Hours/Week: _____
Number & Titles of Employees You Supervised:	Supervisor's Name & Title: _____

Duties:

Employer #3	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:
Duties:	
Employer #4	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:
Duties:	
Employer #5	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:
Duties:	
Employer #6	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:

Duties:

Employer #7	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:
Duties:	
Employer #8	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:
Duties:	
Employer #9	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:
Duties:	
Employer #10	From (mm/yy): _____ To (mm/yy): _____ _____ - _____
Complete Address and phone number:	Last Weekly Pay \$
Your Title:	Hours/Week:
Number & Titles of Employees You Supervised:	Supervisor's Name & Title:

Duties:

The State of Maine conducts background checks.

Have you ever been convicted of any violation of law by any court of law? Include any guilty pleas entered, military courts martial, traffic violation convictions for Operating Under the Influence (OUI), or traffic violations that resulted in your license being suspended. Do not include here any juvenile adjudications or traffic violations not listed above. Some positions require disclosure of juvenile adjudications. Applicants for these positions will be required to disclose juvenile adjudications on a supplemental form provided for that purpose.

Please print your answer (either "Yes" or "No") in the space provided: _____

If yes, please list: Offense(s)	Date of Conviction(s)
_____	_____
_____	_____
_____	_____
_____	_____

Not all conviction(s) or adjudication(s) will automatically disqualify you from employment but will be considered in relation to specific job requirements. Omission or misrepresentation of this information will result in employment ineligibility.

Please read and sign the following statement: I certify, under penalty of law, that the information given in this application is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show falsification, I will not be considered for employment or, if employed, I may be dismissed. I hereby authorize the State of Maine, the Department of Administrative and Financial Services, Bureau of Human Resources and agencies to whom my name is certified/referred to make all necessary investigations concerning me, my work habits, character, or my action in any transaction. I authorize the State of Maine to check my driving record if the position for which I am applying requires driving. I understand that I may be asked to submit to a pre-employment drug test, a credit history check and/or a criminal history background check as a condition of employment. I authorize the Bureau of Human Resources or its assignee to receive and make available to other state agencies my academic records or other material pertinent to my qualifications, and further authorize and request each former employer, person given as reference, educational institution or organization (including law enforcement agencies) to provide all information that may be sought in connection with my application. I understand and agree that I will be required to ratify the information contained in this application by signature as a condition of employment.

Signature _____ Date _____

Human Resources Use Only							Date Stamp
Review	Initials	Date	<input type="checkbox"/> Closing Date		Date Sent:		
1			<input type="checkbox"/> Supplemental Questions		Date Due:		
2			<input type="checkbox"/> Qualified			<input type="checkbox"/> Not Qualified	
3			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Conditionally Qualified			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Reason	
Exam Components		%	Date	Results	Record	Comments	
MERS							
T & E							
Written							
PAT							
Oral						Convert Score From	
Service Rating							
1 Performance							
2 Performance							
							Entry control Label
AGENCY PERSONNEL USE ONLY							
Minimum Qualifications			<input type="checkbox"/> Pass <input type="checkbox"/> Fail		Date	Rater's Name	
Testing Record				Results			

Hired in Classification Title	Agency	Effective Date	Position Number	
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APPLICANT INFORMATION SURVEY

INSTRUCTIONS TO THE APPLICANT: The State of Maine is an Equal Opportunity Employer. The information solicited on this page is being compiled by the Maine Bureau of Human Resources to comply with Federal record-keeping regulations and EEO/Affirmative Action requirements. You are **not required** to furnish this information, but your cooperation is encouraged. The information on this form is CONFIDENTIAL. The page will be removed from your application prior to review and destroyed after data compilation.

RACIAL/ETHNIC DEFINITIONS

0. WHITE (not of Hispanic Origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

1. BLACK (not Hispanic Origin): All persons having origins in any of the Black racial groups of Africa.

2. HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

3. ASIAN OR PACIFIC ISLANDERS: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.

4. AMERICAN INDIAN OR ALASKAN NATIVE: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

6. OTHER

☐ 1. I have read the paragraph above and do not wish to provide the information.

-- 2. Enter your date of birth
(month) (day) (year)

☐ 3. Enter your racial/ethnic group code number
(refer to definitions at left)

☐ 4. What is your sex? A. Female B. Male

DEFINITIONS OF VETERANS SUBJECT TO EEO/AFFIRMATIVE ACTION REGULATIONS:

(The requirements are different from State Veterans Preference)

VIETNAM ERA VETERAN: One who served on active duty for more than 90 days, any part of which occurred between August 5, 1964 and July 7, 1975 and was discharged or released other than a dishonorable discharge, or was discharged or released from active duty for a service-connected disability if any part of such active duty was performed between August 5, 1964 and July 7, 1975.

DISABLED VETERAN: A person entitled to disability compensation under laws administered by the Veterans Administration for a disability rated at 30 per cent or more, or a person whose release from active duty was for a disability incurred or aggravated in the line of duty.

PLEASE PLACE AN X IN ALL BOXES WHICH APPLY TO YOU (refer to definitions at left)

☐ 5. Vietnam Era Veteran

☐ 6. Disabled Veteran

DEFINITION FOR DISABILITY

Any person who has a physical or mental impairment which substantially limits one or more of such person's major life activities, has a record of such impairment, or is regarded as having such impairment has a disability under the Americans With Disabilities Act. Major life activities include: walking, seeing, hearing, learning, self-care, speaking, lifting, reaching, thinking performing manual tasks, breathing, working and interacting with others.

PLEASE PLACE AN X IN ALL BOXES WHICH APPLY TO YOU (refer to definitions at left)

- ☐ 7. Have a disability as defined
- ☐ 8. Interview accommodations may be necessary due to a disability